Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

page 1

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on	Michael		Eva
your government-issued	First name		First name
example, your driver's	L.		M.
license or passport).	Middle name		Middle name
Bring your picture	Hubbard		Janus
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0071		xxx-xx-5555
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Hubbard  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	About Debtor 1:  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Hubbard  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Michael  First name  L.  Middle name  Hubbard  Last name and Suffix (Sr., Jr., II, III)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)
	EINs	EINs
Where you live	28268 Oakwood Ave. Flat Rock, MI 48134	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Wayne	
County		County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  Business name(s)  Business name(s)  Business name(s)  EINS  Where you live  28268 Oakwood Ave. Flat Rock, MI 48134 Number, Street, City, State & ZIP Code  Wayne  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Why you are choosing this district to file for bankruptcy  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

	otor 1 otor 2	Michael L. Hubbar Eva M. Janus	d				Case number (if known)	
Par	rt 2:	Tell the Court About \	Your Bank	ruptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are				n, see <i>Notice Required b</i> and check the appropri	y 11 U.S.C. § 342(b) for Individuals Filing for Bankrup ate box.	tcy
	choc	sing to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo ord a p I ne The U I re but app	out how your re-printed red to pare Filing Ferquest that is not recolled to you	ou may pay. Typically, is attorney is submitting yaddress.  If the fee in installments (Office in Installments) (Office in Installments) (Office it my fee be waived (Yauired to, waive your fee ur family size and your and your fee in Installments)	f you are paying the feet your payment on your be lefts. If you choose this optical Form 103A).  You may request this optical, and may do so only if you choose the feet was the feet when the feet was a feet with the feet was t	eck with the clerk's office in your local court for more of yourself, you may pay with cash, cashier's check, or nethalf, your attorney may pay with a credit card or check tion, sign and attach the <i>Application for Individuals to</i> ion only if you are filing for Chapter 7. By law, a judge your income is less than 150% of the official poverty lie in installments). If you choose this option, you must fificial Form 103B) and file it with your petition.	money k with  Pay  may, ne that
9.	bank	you filed for ruptcy within the 3 years?	■ No.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	case filed not f you,	any bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	■ No □ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	□ No.	Go to	line 12.			
	resio	lence?	Yes.	Has yo	our landlord obtained ar	n eviction judgment agair	nst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Sta</i> bankruptcy petition.	tement About an Eviction	n Judgment Against You (Form 101A) and file it with the	his

	otor 1 Michael L. Hubbar otor 2 Eva M. Janus	rd 			Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owi	n as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec		x to describe your business:		
					ness (as defined in 11 U.S.C. § 101(27A))		
				•	Estate (as defined in 11 U.S.C. § 101(51B))		
				•	efined in 11 U.S.C. § 101(53A))		
				•	er (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropallines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statementations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Debtor 2

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### AL (B.1) 4

**About Debtor 1:** 

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Michael L. Hubbar otor 2 Eva M. Janus	rd			Case numbe	et (if known)			
Par	t 6: Answer These Quest	ions for R	Reporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
		4.01	Yes. Go to line 17.	este es establis O.D. (					
		16b.		<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you or	we that are not consur	mer debts or busines	es debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	I am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Deare paid that funds will be available.			erty is excluded and administrative expense?			
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000		<b>2</b> 5,001-50,000			
	you estimate that you owe?	50-99		☐ 5001-10,000 ☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000			
		☐ 100-1 ☐ 200-9		<b>□</b> 10,001-25,0	00	□ More than 100,000			
19.	How much do you	<b>\$</b> 0 - \$	\$50,000	□ \$1,000,001 -	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	\$10,000,001		\$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 □ \$100,000,00	- \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001 -	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	\$10,000,001	•	\$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			□ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 bi □ \$100,000,001 - \$500 million □ More than \$50 billion				
Dos	t 7: Sign Below	<b>—</b> \$500	,σοι - φι million			·			
	you	I have ex	xamined this petition, and I dec	lare under penalty of p	perjury that the inform	nation provided is true and correct.			
						under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.			
			orney represents me and I did n nt, I have obtained and read the			t an attorney to help me fill out this			
		I reques	t relief in accordance with the c	hapter of title 11, Unite	ed States Code, spec	cified in this petition.			
		bankrupt and 357	tcy case can result in fines up t 1.		onment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519			
			nael L. Hubbard I L. Hubbard		/s/ Eva M. Janus Eva M. Janus	<u> </u>			
			e of Debtor 1		Signature of Debto	r 2			

Executed on December 3, 2018 MM / DD / YYYY

Executed on December 3, 2018 MM / DD / YYYY

200101 2	Lva m. vanus		
Debtor 2	Eva M. Janus	Case number (if known)	
Debtor 1	Michael L. Hubbard		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Bryan Yaldou	Date	December 3, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Bryan Yaldou P70600		
Printed name		
<b>Consumer Protection Attorneys of Mi</b>	chigan, PLLC	
Firm name		
23000 Telegraph Rd, Suite 5		
Brownstown, MI 48134		
Number, Street, City, State & ZIP Code		
Contact phone <b>734-692-9200</b>	Email address	bryan.yaldou@gmail.com
P70600 MI		
Bar number & State		

	rmation to identify your	case.			
Debtor 1	Michael L. Hubba				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Eva M. Janus First Name	Middle Name	Last Name		
	and the second for the	EACTEDN DICTRICT (	OF MICHICAN		
United States B	ankruptcy Court for the:	EASTERN DISTRICT (	DE MICHIGAN		
Case number					
(if known)				_	if this is an
				ameno	led filing
Official Fo	orm 106Sum				
		and Liahilities a	nd Certain Statistical Information	1	2/15
			e are filing together, both are equally responsible fo		
			he information on this form. If you are filing amende		
			k the box at the top of this page.		•
Part 1: Sumr	marize Your Assets				
Cumi	nunze real Assets				
				Your as	
				value of	f what you own
1. Schedule	A/B: Property (Official Fo	orm 106A/B)		<b>c</b>	0.00
1a. Copy li	ne 55, Total real estate, f	rom Schedule A/B		\$	0.00
1b. Copy li	ine 62, Total personal pro	perty, from Schedule A/B.		\$	28,398.00
1c. Copy li	ne 63, Total of all propert	y on Schedule A/B		\$	28,398.00
Part 2: Sumr	marize Your Liabilities				
<u> </u>					
				Your lia	
				Amount	you owe
		Claims Secured by Property		¢	41,132.00
2a. Copy th	ne total you listed in Colui	mn A, <i>Amount of claim</i> , at	the bottom of the last page of Part 1 of Schedule D	\$	41,132.00
		Unsecured Claims (Officia	,	•	0.00
3a. Copy t	the total claims from Part	1 (priority unsecured clain	ns) from line 6e of Schedule E/F	\$	0.00
3b. Copy t	the total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	34.417.51
.,		` , ,	,		,
			V	<b>c</b>	75 540 54
					75,549.51
			Your total liabilities	Ф	
			Your total liabilities	<b>D</b>	
Part 3: Sumr	marize Your Income and	i Expenses	Your total liabilities	<b>Ф</b>	
			Your total liabilities	<b>\$</b>	
4. Schedule I	I: Your Income (Official Fo	orm 106l)	Your total liabilities	\$	2,938.26
4. Schedule I Copy your	I: Your Income (Official Fo	orm 106I) ne from line 12 of <i>Schedul</i> e		\$	2,938.26
Schedule I     Copy your     Schedule S	I: Your Income (Official Focombined monthly incom	orm 106I) ne from line 12 of <i>Scheduk</i> ıl Form 106J)	ə <i>I</i>	\$ \$ \$	2,938.26 2,935.00
<ol> <li>Schedule I Copy your</li> <li>Schedule Copy your</li> </ol>	I: Your Income (Official Focombined monthly incom  J: Your Expenses (Official monthly expenses from li	orm 106I) ne from line 12 of <i>Scheduk</i> Il Form 106J) ine 22c of <i>Schedule J</i>	ə I	\$ \$ \$	<u>·</u>
<ol> <li>Schedule I Copy your</li> <li>Schedule Copy your</li> </ol>	I: Your Income (Official Focombined monthly incom  J: Your Expenses (Official monthly expenses from li	orm 106I) ne from line 12 of <i>Scheduk</i> ıl Form 106J)	ə I	\$ \$	<u>·</u>
<ol> <li>Schedule I Copy your</li> <li>Schedule Copy your</li> <li>Part 4: Answ</li> </ol>	I: Your Income (Official Focombined monthly incom  J: Your Expenses (Official monthly expenses from liver These Questions for	orm 106I) ne from line 12 of <i>Scheduk</i> Il Form 106J) ine 22c of <i>Schedule J</i>	e /	\$ \$ \$	<u>·</u>
<ol> <li>Schedule I Copy your</li> <li>Schedule Copy your</li> <li>Part 4: Answ</li> <li>Are you file</li> </ol>	I: Your Income (Official Focombined monthly income)  J: Your Expenses (Official monthly expenses from liver These Questions for ling for bankruptcy under the complex of th	orm 106I) the from line 12 of Schedule of Form 106J) the 22c of Schedule J or Administrative and State ler Chapters 7, 11, or 13?	e /	\$	2,935.00
4. Schedule I Copy your  5. Schedule Copy your  Part 4: Answ  6. Are you fil	I: Your Income (Official Focombined monthly income)  J: Your Expenses (Official monthly expenses from liver These Questions for ling for bankruptcy under the complex of th	orm 106I) the from line 12 of Schedule of Form 106J) the 22c of Schedule J or Administrative and State ler Chapters 7, 11, or 13?	e /	\$	2,935.00
<ul> <li>4. Schedule I Copy your</li> <li>5. Schedule Copy your</li> <li>Part 4: Answ</li> <li>6. Are you fil No. Y</li> <li>Yes</li> </ul>	I: Your Income (Official Focombined monthly income)  J: Your Expenses (Official monthly expenses from liver These Questions for ling for bankruptcy under the complex of th	orm 106I) the from line 12 of Schedule of Form 106J) the 22c of Schedule J or Administrative and State ler Chapters 7, 11, or 13?	e /	\$	2,935.00

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Debtor 1	Michael L. Hubbard
Debtor 2	Fva M. Janus

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,625.46

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	m
, ,,		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,940.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	5,940.00

Debtor 1	Michael L. Hubbard			
	First Name	Middle Name Last Name		
ebtor 2 spouse, if filing	Eva M. Janus First Name	Middle Name Last Name		
nited State	es Bankruptcy Court for the: EA	STERN DISTRICT OF MICHIGAN		
ase numb	er			☐ Check if this is a
				amended filing
Official	Form 106A/B			
chec	lule A/B: Proper	tv.		12/15
		ms. List an asset only once. If an asset fits in more than o	ne category, list the asset in	
ink it fits be	est. Be as complete and accurate as f more space is needed, attach a se	s possible. If two married people are filing together, both a parate sheet to this form. On the top of any additional pag	re equally responsible for su	ipplying correct
swer every	question.			
art 1: Des	cribe Each Residence, Building, Lar	nd, or Other Real Estate You Own or Have an Interest In		
Do you ow	n or have any legal or equitable inte	erest in any residence, building, land, or similar property?		
■ No. Go	. D . O			
_				
☐ Yes. W	here is the property?			
you owr meone els Cars, vai		ole interest in any vehicles, whether they are registers so report it on Schedule G: Executory Contracts and U vehicles, motorcycles		ehicles you own that
you owr meone els Cars, vai	n, lease, or have legal or equitable drives. If you lease a vehicle, al	so report it on Schedule G: Executory Contracts and U		ehicles you own that
o you owr omeone els Cars, vai \textsup No \textsup Yes	i, lease, or have legal or equitable drives. If you lease a vehicle, alons, trucks, tractors, sport utility	so report it on Schedule G: Executory Contracts and U	Inexpired Leases.  Do not deduct secured cl	aims or exemptions. Put
o you owr omeone els Cars, vai □ No ■ Yes	i, lease, or have legal or equitable drives. If you lease a vehicle, alons, trucks, tractors, sport utility  Skyline	so report it on Schedule G: Executory Contracts and U vehicles, motorcycles	Inexpired Leases.	aims or exemptions. Put
Cars, val	i, lease, or have legal or equitable drives. If you lease a vehicle, alons, trucks, tractors, sport utility  Skyline	wehicles, motorcycles  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured cl	aims or exemptions. Put
o you owr omeone els Cars, van No Yes 3.1 Make Mode Year: Appro	s, lease, or have legal or equitable drives. If you lease a vehicle, all ns, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage:	who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.
o you owr omeone els Cars, van No Yes 3.1 Make Mode Year: Appro	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990	wehicles, motorcycles  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clait	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you owr omeone els Cars, van No Yes 3.1 Make Mode Year: Appro	s, lease, or have legal or equitable drives. If you lease a vehicle, all ns, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage:	who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clait	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the
o you ownomeone else Cars, val	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage: information:	wehicles, motorcycles  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$18,000.00	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
D you own omeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage: information:  Dodge	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured of the amount of any secure	laims or exemptions. Put led claims on Schedule D: lims Secured by Property.  Current value of the portion you own?  \$18,000.00
Dyou owr meone els Cars, val No Yes 3.1 Make Mode Year: Appro Other	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage: information:  Dodge Dakota	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$18,000.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.
Dyou owr meone els Cars, val No Yes 3.1 Make Mode Year: Appro Other	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage: information:  Dodge  Dakota 2004	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the
O you ownomeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other	s, lease, or have legal or equitable drives. If you lease a vehicle, allows, trucks, tractors, sport utility  Skyline manufactured home 1990 eximate mileage: information:  Dodge Dakota	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$18,000.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.
O you owromeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other	c, lease, or have legal or equitable drives. If you lease a vehicle, all the drives are drives. If you lease a vehicle, all the drives, trucks, tractors, sport utility  E. Skyline  manufactured home  1990  eximate mileage: information:  Dodge  Dakota  2004  eximate mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.00  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the
O you owromeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other	c, lease, or have legal or equitable drives. If you lease a vehicle, all the drives are drives. If you lease a vehicle, all the drives, trucks, tractors, sport utility  E. Skyline  manufactured home  1990  eximate mileage: information:  Dodge  Dakota  2004  eximate mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.0  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
O you owromeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other	c, lease, or have legal or equitable drives. If you lease a vehicle, all the drives are drives. If you lease a vehicle, all the drives, trucks, tractors, sport utility  E. Skyline  manufactured home  1990  eximate mileage: information:  Dodge  Dakota  2004  eximate mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.0  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Dyou ownomeone else Cars, value No Yes  3.1 Make Mode Year: Appro Other  3.2 Make Mode Year: Appro Other  Watercra	s, lease, or have legal or equitable drives. If you lease a vehicle, all as, trucks, tractors, sport utility  Skyline  manufactured home 1990  eximate mileage: information:  Dodge  Dakota 2004  eximate mileage: information:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$18,000.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$1,500.00	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$18,000.0  aims or exemptions. Put ad claims on Schedule D: ims Secured by Property.  Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Debtor 2	Michael L. F Eva M. Janu		own)
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=	\$19,500.00
Part 3: D	escribe Your Perso	onal and Household Items	
		egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	hold goods and to bles: Major appliar  . Describe	furnishings nces, furniture, linens, china, kitchenware	
		Ordinary Household Goods and Furnishings	\$1,000.00
□ No	oles: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu I phones, cameras, media players, games	sic collections; electronic devices
		Ordinary Electronics	\$3,000.00
Examp		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, ons, memorabilia, collectibles	coin, or baseball card collections;
	nent for sports a ples: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can	oes and kayaks; carpentry tools;
	. Describe		
■ No	nples: Pistols, rifle	s, shotguns, ammunition, and related equipment	
11. <b>Cloth</b> Exan □ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Clothing and shoes	\$200.00
□ No	nples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ger	ms, gold, silver
■ Yes	. Describe	Jewelry	\$50.00
		out on y	
		Jewelry	\$25.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor Debtor		opard	Case number (if I	known)
	n-farm animals			
Exa	amples: Dogs, cats, bi	ds, horses		
	es. Describe			
	-			***
		1 cat, 1 dog, 10 fish		\$12.00
44			at along the light in alreading a great health aids was alid wat	l'at
14. <b>Any</b> ■ N	•	nousenoia items you ala n	ot already list, including any health aids you did not	list
	es. Give specific infor	mation		
	·			
			rt 3, including any entries for pages you have attach	ed \$4,287.00
Part 4:	Describe Your Financia	al Assets		
		al or equitable interest in a	iny of the following?	Current value of the
				<ul><li>portion you own?</li><li>Do not deduct secured claims or exemptions.</li></ul>
16. <b>Cas</b> <i>Exa</i> □ N	amples: Money you ha	ve in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file you	r petition
Y	es			
			Cash	\$11.00
□ N ■ Y		you nave multiple accounts (	vith the same institution, list each.  Institution name:	
		17.1.	Bank of America (Checking and Savings)	\$1,400.00
		17.2.	Huntington (Checking)	\$100.00
		17.3.	Huntington (Checking and Savings)	\$100.00
		publicly traded stocks vestment accounts with brok	erage firms, money market accounts	
■ N	· <del>-</del>	Landing and a second		
ШΥ	es	Institution or issuer na	ame:	
joiı	nt venture	k and interests in incorpo	ated and unincorporated businesses, including an i	nterest in an LLC, partnership, and
■ N	· <del>-</del>	mation about them		
	co. Civo apocinio initor	Name of entity:	% of ownership.	
Ne No ■ N	gotiable instruments in n-negotiable instrumer o	clude personal checks, cash nts are those you cannot tran	able and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
ΠY	es. Give specific inforr	nation about them		

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2	Michael L. Hubbard Eva M. Janus		Case number (if known)
	Issuer nam	ne:	
	ment or pension accounts ples: Interests in IRA, ERISA, Ked	gh, 401(k), 403(b), thrift savings accounts, or other pe	ension or profit-sharing plans
■ Yes.	List each account separately.  Type of accounts	unt: Institution name:	
		Carpenter's Pension (Define Pension)	ed Benefit Unknown
Yours		ave made so that you may continue service or use froncepaid rent, public utilities (electric, gas, water), telec	
		Institution name or individual:	
23. <b>Annui</b> <b>D</b> No	ties (A contract for a periodic payr	ment of money to you, either for life or for a number of	years)
Yes.	lssuer name and d	lescription.	
	Retirement Ann	nuity through Union	Unknown
25. Trusts  No Yes.  26. Patent Exam No Yes.  27. Licens Exam No	Give specific information about the standard s	e secrets, and other intellectual property sites, proceeds from royalties and licensing agreement hem ral intangibles censes, cooperative association holdings, liquor licen	d rights or powers exercisable for your benefit
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	funds owed to you  Give specific information about th	nem, including whether you already filed the returns an	
		11/12 anticipated 2018 Tax Refunds and Credits	\$3,000.00
■ No		ny, spousal support, child support, maintenance, divo	ce settlement, property settlement

Official Form 106A/B Schedule A/B: Property page 4

	ebtor 1 ebtor 2	Michael L. Hubbard Eva M. Janus	Case number (if known)	
30.		amounts someone owes you  oles: Unpaid wages, disability insurance payments, disability benefits, sich benefits; unpaid loans you made to someone else	k pay, vacation pay, workers' compensa	ntion, Social Security
	■ No □ Yes.	Give specific information		
		ets in insurance policies		
		oles: Health, disability, or life insurance; health savings account (HSA); cr	edit, homeowner's, or renter's insurance	
	■ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Term Life through Employer (Death benefit only)		Unknown
	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died.	policy, or are currently entitled to receive	e property because
	■ No □ Yes.	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or madeles: Accidents, employment disputes, insurance claims, or rights to sue	de a demand for payment	
	_	Describe each claim		
34.	Other o	contingent and unliquidated claims of every nature, including counte	erclaims of the debtor and rights to se	et off claims
	_	Describe each claim		
35.	Any fin	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any entries the that number here	. •	\$4,611.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List ar	y real estate in Part 1.	
	_ ′	own or have any legal or equitable interest in any business-related property?		
	_	o to Part 6.		
L	→ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have ou own or have an interest in farmland, list it in Part 1.	an Interest In.	
46.	_ `	own or have any legal or equitable interest in any farm- or commercing to to Part 7.	cial fishing-related property?	
	☐ Yes.	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not List	Above	
53.	Examp	have other property of any kind you did not already list?  bles: Season tickets, country club membership		
	■ No	Give specific information		

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Debtor 2	Michael L. Hubbard Eva M. Janus		Case number (if known)	
54. <b>Add</b>	I the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Part</b>	t 1: Total real estate, line 2			\$0.00
56. <b>Part</b>	t 2: Total vehicles, line 5	\$19,500.00		
57. <b>Par</b> t	t 3: Total personal and household items, line 15	\$4,287.00		
58. <b>Part</b>	t 4: Total financial assets, line 36	\$4,611.00		
59. <b>Part</b>	t 5: Total business-related property, line 45	\$0.00		
60. <b>Part</b>	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b>	t 7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tot</b> a	al personal property. Add lines 56 through 61	\$28 398 00	Copy personal property total	\$28 398 00

\$28,398.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Michael L. Hubba	rd		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

#### Official Form 106C

# Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
De	ebtor 1 Exemptions 2004 Dodge Dakota Line from Schedule A/B: 3.2	\$1,500.00	•	\$1,500.00	11 U.S.C. § 522(d)(2)			
				100% of fair market value, up to any applicable statutory limit				
	Ordinary Household Goods and Furnishings	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Ordinary Electronics Line from Schedule A/B: 7.1	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(3)			
	Elle Holli Geriedale PAB. TT			100% of fair market value, up to any applicable statutory limit				
	Clothing and shoes Line from Schedule A/B: 11.1	\$200.00		\$100.00	11 U.S.C. § 522(d)(3)			
	Line Holli Golledale PAB. 11.1			100% of fair market value, up to any applicable statutory limit				
	Jewelry Line from Schedule A/B: 12.2	\$25.00		\$25.00	11 U.S.C. § 522(d)(4)			
	LINE HOITI SCHEUUIE AVD. 12.2			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	1 cat, 1 dog, 10 fish Line from Schedule A/B: 13.1	\$12.00		\$12.00	11 U.S.C. § 522(d)(3)	
	Ellie Holli Genedale A.B. 1911			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$11.00	•	\$11.00	11 U.S.C. § 522(d)(5)	
	Ellie Holli Goricadie 7V Z. 1911			100% of fair market value, up to any applicable statutory limit		
	Bank of America (Checking and Savings)	\$1,400.00		\$1,400.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Huntington (Checking and Savings) Line from Schedule A/B: 17.3	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)	
	Ellio Iloni odinodalo il Di			100% of fair market value, up to any applicable statutory limit		
	Carpenter's Pension (Defined Benefit Pension)	Unknown			11 U.S.C. § 522(d)(12)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Carpenter's Pension (Defined Benefit Pension)	Unknown			11 U.S.C. § 522(d)(10)(E)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Retirement Annuity through Union Line from Schedule A/B: 23.1	Unknown			11 U.S.C. § 522(d)(10)(E)	
	Line nom Schedule AVB. 23.1			100% of fair market value, up to any applicable statutory limit		
	Retirement Annuity through Union Line from Schedule A/B: 23.1	Unknown			11 U.S.C. § 522(d)(12)	
	Line nom Schedule A/B. 23.1			100% of fair market value, up to any applicable statutory limit		
	11/12 anticipated 2018 Tax Refunds and Credits	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	Term Life through Employer (Death benefit only)	Unknown			11 U.S.C. § 522(d)(7)	
	Line from Schedule A/B: 31.1		-	100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3  No			led on or after the date of adjustmer	nt.)	
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case	?	
	☐ Yes					

mation to identify your	case:		
First Namo	Middle Name	Lact Namo	
Eva M. Janus	Wildule INAME	Lastivallie	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
			☐ Check if this is an amended filing
	First Name  Eva M. Janus  First Name	Eva M. Janus First Name Middle Name	First Name Middle Name Last Name  Eva M. Janus  First Name Middle Name Last Name

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exem	pt
---------	--------------	----------	-----------	---------	----

าa with vou	spouse is filing with vo	even if vour spouse i	Check one only, even	Which set of exemptions are you claiming
าg ห	spouse is tiling w	even it your spouse i	Check one only, even	Which set of exemptions are you claiming

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 2 Exemptions Ordinary Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,000.00	■	\$500.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	Ordinary Electronics Line from Schedule A/B: 7.1	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Clothing and shoes Line from Schedule A/B: 11.1	\$200.00		\$100.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
				100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$11.00		\$11.00	11 U.S.C. § 522(d)(5)
	End nom constant / D. Terr			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

		escription of the property and line on ale A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		ngton (Checking) om Schedule A/B: <b>17.2</b>	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Lino	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			100% of fair market value, up to any applicable statutory limit	
		ngton (Checking and Savings)	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	LINGTH	on Schedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
	11/12 and C	anticipated 2018 Tax Refunds	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(5)
		om Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.		u claiming a homestead exemption of to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	□ Y	es. Did you acquire the property cover	ed by the exemption wi	ithin 1	215 days before you filed this case	?
		l No				
		l Yes				

Fill in this information	tion to identify you	ir case:				
Debtor 1	Michael L. Hubl	pard				
	First Name	Middle Name Last N	lame			
Debtor 2 (Spouse if, filing)	Eva M. Janus First Name	Middle Name Last N	Namo			
(Spouse II, IIIIIg)	i iist ivame					
United States Bankı	ruptcy Court for the	EASTERN DISTRICT OF MICHIGAN				
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Forms	400D					
Official Form						
Schedule D	: Creditors	Who Have Claims Sec	ured	by Propert	У	12/15
is needed, copy the A number (if known).	dditional Page, fill it	If two married people are filing together, bot out, number the entries, and attach it to this				
1. Do any creditors ha						
	is box and submit t	his form to the court with your other sched	ules. You	u have nothing else t	o report on this form.	
Yes. Fill in al	I of the information	below.				
Part 1: List All S	Secured Claims					
		more than one secured claim, list the creditor se		Column A	Column B	Column C
		<ul> <li>a particular claim, list the other creditors in Par cal order according to the creditor's name.</li> </ul>	t 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	-		value of collateral.	claim	if any
2.1 Triad Fin Sv Creditor's Name	<u></u>	Describe the property that secures the claim		\$41,132.00	\$18,000.00	\$23,132.00
		1990 Skyline manufactured home	,			
		As of the data was file the claim in a				
4336 Pablo		As of the date you file, the claim is: Check a apply.	II that			
Jacksonville	<del></del>	Contingent				
Number, Street, Ci	ty, State & Zip Code	Unliquidated				
Who owes the debt	2 Chaak ana	☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	r Check one.	☐ An agreement you made (such as mortgage	00 OF 000U	urod		
Debtor 2 only		car loan)	je or secu	ireu		
■ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)			
	debtors and another	☐ Judgment lien from a lawsuit	,			
		Other (including a right to offset)				
Check if this claim community debt						
☐ Check if this claim	Opened					
☐ Check if this claim	2/09/16					
☐ Check if this claim	2/09/16 Last Active	Last 4 digits of account number	0216			
☐ Check if this clain community debt	2/09/16 Last Active	Last 4 digits of account number	0216			
☐ Check if this clain community debt	2/09/16 Last Active	Last 4 digits of account number	0216			
Check if this claim community debt	2/09/16 Last Active 7/22/18 e of your entries in C	Last 4 digits of account number  olumn A on this page. Write that number her the dollar value totals from all pages.		\$41,13 \$41,13		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in this	information to identify your o	ase:			
Debtor 1	Michael L. Hubbar	rd			
	First Name	Middle Name	Last Name		
Debtor 2	Eva M. Janus				
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case numb	ner				
(if known)				1	☐ Check if this is an
					amended filing
Official I	Form 106F/F				
	Form 106E/F	ha Hawa Haaaaw	ad Claima		40/45
	lle E/F: Creditors W			Part 2 for creditors with NONPRIORIT	12/15
name and ca	he Continuation Page to this pag use number (if known). List All of Your PRIORITY Un:	•	o report in a Part, o	lo not file that Part. On the top of any	additional pages, write your
1. Do any	creditors have priority unsecured	d claims against you?			
■ No. (	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	ured claims against you?			
□ No. \	You have nothing to report in this pa	art. Submit this form to the court	with your other sche	edules.	
Yes.					
4. List all o	ed claim, list the creditor separately	for each claim. For each claim	listed, identify what t	holds each claim. If a creditor has mo ype of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or	dy included in Part 1. If more
					Total claim
	ly Financial	Last 4 digits of	f account number	9128	\$6,071.00
	npriority Creditor's Name tn: Bankruptcy Dept			Opened 08/15 Last Active	
	Box 380901	When was the	debt incurred?	7/27/18	
	oomington, MN 55438				
	mber Street City State Zlp Code	As of the date	you file, the claim i	s: Check all that apply	
_	o incurred the debt? Check one.	_			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated	i		
	Debtor 1 and Debtor 2 only	☐ Disputed	DIODITY	Lalaine	
_	At least one of the debtors and ano		RIORITY unsecured	i Ciaiiif:	
	Check if this claim is for a comn	lunity			
dek		u Obligations :			
	he claim subject to offset?	report as priority		ration agreement or divorce that you did	not
	he claim subject to offset?	report as priority	y claims	g plans, and other similar debts	not

	1 Michael L. Hubbard 2 Eva M. Janus		Case number (if known)	
4.2	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	7496	\$1,280.00
	Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 08/15 Last Active 9/25/18	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4584	\$2,749.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/15 Last Active 3/17/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	CBCS Nonpriority Creditor's Name PO Box 163250	Last 4 digits of account number  When was the debt incurred?		\$36.00
	Columbus, OH 43216  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured  Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify med		

Nitibanis/Tha Hamas Desast	Land A dissipation of the control of	7400	A704 00
Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	7480	\$731.00
Attn: Recovery/Centralized		Opened 04/16 Last Active	
Bankruptcy Po Box 790034	When was the debt incurred?	3/01/18	
St Louis, MO 63179			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
] Yes	Other. Specify Charge Acc	count	
David G. Patterson DO	Last 4 digits of account number		\$215.00
Ionpriority Creditor's Name	_		<del>+=</del> ::::•
Attn: 13776C PO Box 14000	When was the debt incurred?		
Belfast, ME 04915			
lumber Street City State Zlp Code  Vho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify med		
Dept of Ed / Navient	Last 4 digits of account number	1124	\$5,940.00
Nonpriority Creditor's Name Attn: Claims Dept		Opened 11/15 Last Active	
Po Box 9635	When was the debt incurred?	10/31/18	
Vilkes Barr, PA 18773	=		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	■ Student loans		
lebt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	Michael L. Hubbard Eva M. Janus		Case number (if known)	
4.8	Diversified Consultants, Inc.	Last 4 digits of account number	4206	\$830.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 551268	When was the debt incurred?	Opened 07/18	
	Jacksonville, FL 32255  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated☐		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Collection	• •	
4.9	DTE Energy Nonpriority Creditor's Name	Last 4 digits of account number		\$5,983.59
	1 Energy Plz #WCB2106	When was the debt incurred?		
	Detroit, MI 48226 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Utilities		
4.1	Henry Ford Health System  Nonpriority Creditor's Name	Last 4 digits of account number		\$999.92
	PO Box 7044 Troy, MI 48007	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify med		

Mich 1st Cu	Last 4 digits of account number	0001	\$8,457.0
Nonpriority Creditor's Name		Opened 10/14 Last Active	
27000 Evergreen Rd Lathrup Village, MI 48076	When was the debt incurred?	7/21/18	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile	9	
Phoenix Financial Services. Llc	Last 4 digits of account number	3487	\$755.
Nonpriority Creditor's Name			· ·
Po Box 361450 Indianapolis, IN 46236	When was the debt incurred?	Opened 07/18	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other circilar debte	
■ No	' '	· · ·	
Yes	Other. Specify Collection	Attorney Epmg Downriver - Chs	
Sun Home Services	Last 4 digits of account number		\$0.0
Nonpriority Creditor's Name	- Wilson was the debt in some dO		
The American Center 27777 Franklin Rd, Suite 200 Southfield, MI 48034	When was the debt incurred?		
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Notice Part	v	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	Michael L. Hubbard Eva M. Janus		Case number (if known)	
4.1	The River Urgent Care	Last 4 digits of account nu	mber	\$370.00
	Nonpriority Creditor's Name 18930 West Rd. Woodhaven, MI 48183	When was the debt incurre	d?	
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY uns	ecured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of report as priority claims	a separation agreement or divorce that you did not	
	No	☐ Debts to pension or profit	-sharing plans, and other similar debts	
	Yes	Other. Specify med		
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed		
is tryii have r	ng to collect from you for a debt you owe to s	someone else, list the original cred nat you listed in Parts 1 or 2, list th	t that you already listed in Parts 1 or 2. For example, i ditor in Parts 1 or 2, then list the collection agency he e additional creditors here. If you do not have addition	re. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 o	, <u> </u>	
	ce One Receivables gement	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
	Voodlands Dr		■ Part 2: Creditors with Nonpriority Unsecured Clai	ms
	ee, OH 43537	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 or	,	
PO Bo	n Financial ox 610	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	Rapids, MN 56379		■ Part 2: Creditors with Nonpriority Unsecured Clai	ms
		Last 4 digits of account number		
Name ar	nd Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
CBCS		Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	ox 163333		■ Part 2: Creditors with Nonpriority Unsecured Claim	ms
Colum	ibus, OH 43216	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 or		
CBCS		Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
	ox 2589 abus, OH 43216		Part 2: Creditors with Nonpriority Unsecured Claim	ms
Ooluli	1543, 311 40210	Last 4 digits of account number		
Name ar	nd Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
DTE E	0,	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	nergy Plaza/ Attn Bankruptcy		Part 2: Creditors with Nonpriority Unsecured Clai	ms
2160 V	vCB t, MI 48226			
DellOl	t, IIII 40220	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
	Downriver PLLC	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	ox 96115		■ Part 2: Creditors with Nonpriority Unsecured Clair	ms
Unian	oma City, OK 73143-6115	Last 4 digits of account number		

EPMG of Michigan, PC PO Box 96115

Name and Address

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Line **4.12** of (Check one):

Page 6 of 8

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Michael L. Hubbard Eva M. Janus		Case number (if known)
Oklahoma City, OK 73143-6115	Last 4 digits of account number	
Name and Address Firstsource advantage IIc 1232 W ST RD 2 La Porte, IN 46350	On which entry in Part 1 or Part 2 Line <b>4.3</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Henry Ford Wyandotte Hospital PO Box 1799 Colorado Springs, CO 80901	On which entry in Part 1 or Part 2 Line <b>4.10</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Henry Ford Wyandotte Hospital 2333 Biddle Wyandotte, MI 48192	On which entry in Part 1 or Part 2 Line 4.10 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address LJ Ross Associates 6360 W Jackson Rd Ann Arbor, MI 48103	On which entry in Part 1 or Part 2 Line <b>4.10</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address LJ Ross Associates PO Box 6099 Jackson, MI 49204	On which entry in Part 1 or Part 2 Line <b>4.10</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Associates 120 Corporate Blvd Ste 100 Norfolk, VA 23502	On which entry in Part 1 or Part 2 Line <b>4.3</b> of ( <i>Check one</i> ):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541	On which entry in Part 1 or Part 2 Line 4.3 of (Check one):  Last 4 digits of account number	did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Tatal	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 5,940.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 28,477.51

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Michael L. Hubbard Debtor 2 Eva M. Janus

Case number (if known)

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **34,417.51** 

Fill in this inform	ation to identify your	case:		
Debtor 1	Michael L. Hubba	rd		
	First Name	Middle Name	Last Name	
Debtor 2	Eva M. Janus			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number				☐ Check if this is an amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for Name, Number, Street, City, State and ZIP Code **Country Meadows** Lot Rent 3211 Will Carleton Rd. Flat Rock, MI 48134

Fill in this infor	mation to identify your	case:			
Debtor 1	Michael L. Hubba				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	Eva M. Janus First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106H • <b>H: Your Cod</b>	ebtors			12/15
people are filing fill it out, and nu your name and o	together, both are equ mber the entries in the case number (if known)	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct informati h the Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No ■ Yes					
			roperty state or territory uerto Rico, Texas, Washii		rty states and territories include .)
■ No. Go to		use, or legal equivalent liv	ve with you at the time?		
in line 2 aga	ain as a codebtor only i , Schedule E/F (Official	f that person is a guarai	ntor or cosigner. Make s	ure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
out Column					
Colum	nn 1: Your codebtor Jumber, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:

Fill in this information	on to identify your case:	
Debtor 1	Michael L. Hubbard	
Debtor 2 (Spouse, if filing)	Eva M. Janus	
United States Bank	truptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number _		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 106l</u>	MM / DD/ YYYY
<b>Schedule</b>	I: Your Income	12/1:
•	d accurate as possible. If two married people are filing together (De	

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Empleyment status	■ Employed	☐ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
employers.	Occupation	Apprentice Floorlayer	
Include part-time, seasonal, or self-employed work.	Employer's name	Mastercraft Carpet Service	
Occupation may include student or homemaker, if it applies.	Employer's address	15001 Fogg St. Plymouth, MI 48170	
	How long employed the	nere? 4 years	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,758.38 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. +\$ 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,758.38 \$ 0.00

Debtor 1 Michael L. Hubbard Eva M. Janus

Case number (if known)

See List all payroll deductions:    Sa.   Tax, Medicare, and Social Security deductions   Sa.						Debtor 1	For Debtor 2 or non-filing spouse		
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions 5c. Insurance 5c. Social Security 5c. Social Securi		Сору	/ line 4 here	4.	\$	3,758.38	\$	0.00	
Sb. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Insurance 5c. Insurance 5c. Voluntary Contributions (Voluntary Contributions) 5c. Union dues 5c. Voluntary Contributions 5c.	5.	List a	all payroll deductions:						
5.5. Mandatory contributions for retirement plans 5.6. Voluntary contributions for retirement plans 5.7. Solution for retirement plans 5.8. Insurance 5.9. Insurance 5.9. Insurance 5.9. Insurance 5.9. Union dues 5.9. Union due 5.9. Union dues 5.9. Union due 5.9. Union due 5.9. Union dues 5.9. Union due 5. Union due 5.9. Un		5a.	Tax, Medicare, and Social Security deductions	5a.	\$	632.23	\$	0.00	
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. S. 0.00 \$ 0.00 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Volunion dues 5g. Vol		5b.	Mandatory contributions for retirement plans		\$		\$		
5e. Insurance  5f. Domestic support obligations  5f. S. 0.00 \$ 0.00  5g. Union dues  5g. S. \$ 187.89 \$ 0.00  5h. Other deductions. Specify:  5g. S. \$ 187.89 \$ 0.00  5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 820.12 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,938.26 \$ 0.00  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and tusiness showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimonty, spousal support, child support, maintenance, divorce sections, continuation of the property settlement.  8d. Unemployment compensation  8d. Social Security  8e. \$ 0.00 \$ 0.00  8e. Social Security  8e. \$ 0.00 \$ 0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.  12. Southern and the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.		5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		
5g. Union dues 5g. Union dues 5g. Sig. Sig. Sig. Sig. Sig. Sig. Sig. Si		5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
5g. Union dues  5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 820.12 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 2,938.26 \$ 0.00  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. \$ 0.00 \$ 0.00  8e. Social Security  8f. \$ 0.00 \$ 0.00  8d. \$ 0.00  9 0.00  9 0.00  10 0.00		5e.	Insurance	5e.	\$	0.00	\$	0.00	
Sh. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5h+5p+5h.  6. \$ 820.12 \$ 0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 2,938.26 \$ 0.00  8. List all other income regularly received:  8. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8d. \$ 0.00 \$ 0.00  8d. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  11. \$ 2,938.26 + \$ 0.00  12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. On on include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. On object that amount in the las		5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 2,938.26 \$ 0.00  8. List all other income regularly received:  8a. Net income regularly received:  8a. Net income regularly received:  8b. Interest and dividends  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly received Include allmonthy pet income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include allmonthy spetiancem.  8c. \$ 0.00 \$ 0.00  8c. Social Security  8d. \$ 0.00 \$ 0.00  8d. \$ 0.00 \$ 0.00  8d. Unemployment compensation  8e. \$ 0.00 \$ 0.00  8e. Social Security  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8h. Unterest include ash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  11. State all other regular contributions to the expenses that you list in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it performs that applies and statistical summary of Certain Liabilities and Related Data, if it performs that the amount in the last column of line 10 to t		5g.	Union dues				\$	0.00	
<ul> <li>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</li> <li>7. \$ 2,938.26 \$ 0.00</li> <li>8. List all other income regularly received:</li> <li>8a. Net income from ental property and from operating a business, profession, or farm</li></ul>		5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	- \$	0.00	
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00 8d. \$ 0.00 9d. \$ 0	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	820.12	\$	0.00	
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8e. Social Security  8f. 0.00 \$ 0.00  8e. Social Security  8e. \$ 0.00 \$ 0.00  8e. Social Security  8e. \$ 0.00 \$ 0.00  8e. Social Security  8f. 0.00 \$ 0.00  8f. \$ 0.00 \$ 0.00  8g. \$ 0.00 \$ 0.00  8g. \$ 0.00 \$ 0.00  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify:  8f. \$ 0.00 \$ 0.00  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. \$ 2,938.26 \$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,938.26	\$	0.00	
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00  8e. Social Security 10th government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8f. 0.00 \$ 0.00  8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it prices that a property is a property of the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it prices or relatives. Po out of the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it prices or relatives. Po you expect an increase or decrease within the year after you file this form?	8.		Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a	\$	0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8e. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?		8h	·		· —		· —		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.			regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		· -	0.00	· <u> </u>	0.00	
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.		8e.	Social Security	8e.	\$	0.00	\$	0.00	
8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00			Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	_	· —		· -		
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 2,938.26		-		-	· -		*		
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 2,938.26  Combined monthly income  No.		8h.	Other monthly income. Specify:	_ 8h.+ _	\$	0.00	- \$	0.00	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.	10.		•	0. \$	2	,938.26 + \$_	(	0.00 = \$ 2,938.26	
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12.   2,938.26  Combined monthly income  No.	11.	Include other Do no	de contributions from an unmarried partner, members of your household, your of friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depen	-				
13. Do you expect an increase or decrease within the year after you file this form?  ■ No	12.	Write	that amount on the Summary of Schedules and Statistical Summary of Certain						
	13.	Do y	·	•					
☐ Yes. Explain:		=							
		Ц	res. Expiain:						

HIII	in this informa	tion to identify yo	our case:								
Deb	Debtor 2 Fya M. Janus					Check if this is:					
Dob							An amended filing				
	Debtor 2 Eva M. Janus (Spouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date:				
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	SAN		MM / DD / YYYY				
	e number nown)										
Of	fficial Fo	rm 106J									
Sc	chedule	J: Your I	Exper	ises				12/15			
Be a	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this							
Par		ibe Your House	hold								
1.	Is this a joir										
	□ No. Go to										
			in a separ	ate household?							
	■ N □ Y	•	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of De	ebtor 2.				
2.	Do you have	e dependents?	□ No								
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?			
	Do not state dependents				Daughter		3	□ No ■ Yes			
	асренаетта	names.			<u> </u>			. □ No			
					Daughter		5	■ Yes			
							<del>_</del>	□ No			
								Yes			
								□ No			
3.	Do your eyr	enses include	_					Yes			
J.	expenses of	f people other the dependent	han $_{m  au}$	Yes							
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp							
the	•	n assistance and		government assistance i cluded it on Schedule I: \	•		Your exp	penses			
4.		or home owners		nses for your residence. I or lot.	nclude first mortgage	e 4.	\$	995.00			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a.	\$	0.00			
	•	rty, homeowner's				4b.	\$	0.00			
				upkeep expenses		4c.	· :	0.00			
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	me equity loans	4d. 5.	\$ \$	0.00			
J.	Additional	Lyaye payille	onito for yo	za. rooraonoo, suon as no	oquity idalis	٥.	Ψ	0.00			

Schedule J: Your Expenses 18-56210-mar Doc 1 Filed 12/03/18 Entered 12/03/18 11:30:01 Page 33 of 50 Official Form 106J

modification to the terms of your mortgage? Explain here: Rent is anticipated. Debtors plan to surrender the manufactured home.

page 2

Official Form 106J Schedule J: Your Expenses 18-56210-mar

■ No. ☐ Yes.

Fill in this infor	mation to identify your	case:					
Debtor 1	Michael L. Hubba	rd					
	First Name	Middle Name	Las	t Name			
Debtor 2	Eva M. Janus						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT (	OF MICHIGA	.N			
Case number							
(if known)							Check if this is an
						_	amended filing
· You must file thi obtaining mone	eople are filing together is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedule	s or amende	ed sch	edules. Making a fa	lse statement, c	concealing property, or prisonment for up to 20
Sig	n Below						
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help	you fi	ll out bankruptcy fo	orms?	
■ No							
☐ Yes.	Name of person						Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and s	chedu	les filed with this de	eclaration and	
X /s/ Mic	hael L. Hubbard		Х	/s/ E	va M. Janus		
	el L. Hubbard				M. Janus		
Signatu	ire of Debtor 1			Signa	ture of Debtor 2		
Data	December 0 0040			Deta	Dagambar 0 00	040	
Date _	December 3, 2018			Date	December 3, 20	סוט	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill in	this inform	nation to identify you	r case:			
Debto	or 1	Michael L. Hubb	ard			
		First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	Eva M. Janus First Name	Middle Name	Last Name		
` '	•		EASTERN DISTRICT OF			
United	J States Da	nkruptcy Court for the:	EASTERN DISTRICT OF	WICHIGAN		
Case (if know	number _ <sub>n)</sub>				_	heck if this is an mended filing
Stat Be as inform	complete a	and accurate as possi	attach a separate sheet to t	re filing together, both are	ankruptcy equally responsible for supp additional pages, write you	
Part 1		,	stion. rrital Status and Where You	Lived Before		
1. W	/hat is you	r current marital statu	ıs?			
	Married Not mar					
2. D	uring the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
<b>■</b>	■ No ] Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
[	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No ■ Yes. Ma	ake sure you fill out S <i>cl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Explai	in the Sources of You	r Income			
Fi	ill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	II businesses, including part-		dar years?
	] No					
	Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$31,867.64	■ Wages, commissions, bonuses, tips	\$7,263.82
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				5.14			D 14 0		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross in (before of exclusion	leductions and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)		■ Wages, commissions bonuses, tips	S,	\$37,433.00	■ Wages, combonuses, tips	missions,	\$10,030.00		
				☐ Operating a business	S		☐ Operating a	business	
		dar year be December		■ Wages, commissions bonuses, tips	S,	\$40,560.00	■ Wages, combonuses, tips	missions,	\$14,947.00
				☐ Operating a business	S		☐ Operating a	business	
	and other winnings.  List each	public benef If you are fili	fit payments; ing a joint cas he gross inco	per that income is taxable. pensions; rental income; is and you have income the	interest; dividen nat you received	ds; money colled together, list it	cted from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each so	leductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
		y 1 of curre filed for bar	nt year until nkruptcy:	Unemployment		\$720.00			
the									
Fo	r last caler	ndar year: December	31, 2017 )	Unemployment		\$1,500.00			
For (Ja	r last caler nuary 1 to	December	<u> </u>	Unemployment  Made Before You Filed	for Bankruptcy	·			
For (Ja	r last caler nuary 1 to	t Certain Par r Debtor 1's Neither De	yments You or Debtor 2 ebtor 1 nor D		imer debts? onsumer debts	, Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
For (Ja	r last caler nuary 1 to rt 3: Lis	t Certain Pa r Debtor 1's Neither De individual p	yments You or Debtor 2 ebtor 1 nor Deprimarily for a	Made Before You Filed of the State of the St	imer debts? onsumer debts ehold purpose."	. Consumer deb		_	1(8) as "incurred by an
For (Ja	r last caler nuary 1 to rt 3: Lis	t Certain Pa r Debtor 1's Neither De individual p	yments You or Debtor 2 bettor 1 nor E orimarily for a	Made Before You Filed of States and States and States are sentenced as primarily consumers and sentenced are you filed for bankruptcy	imer debts? onsumer debts ehold purpose."	. Consumer deb		_	1(8) as "incurred by an
For (Ja	r last caler nuary 1 to rt 3: Lis	t Certain Pa r Debtor 1's Neither De individual p	yments You  or Debtor 2  ebtor 1 nor Debtor 2  orimarily for a  90 days before Go to line 7  List below or paid that cr	Made Before You Filed of States and States and States are you filed for bankruptcy to be a creditor to whom you editor. Do not include paying the states are you filed for bankruptcy to be a creditor to whom you editor. Do not include paying the states are the s	imer debts? consumer debts ehold purpose." y, did you pay a paid a total of s ments for dome	Consumer deb  ny creditor a tota  66,425* or more stic support obli	al of \$6,425* or mo	re? rments and th	ne total amount you
For (Ja	r last caler nuary 1 to rt 3: Lis	t Certain Par  r Debtor 1's  Neither Deindividual p  During the  No.  Yes	yments You  or Debtor 2  ebtor 1 nor Debtor and 10  orimarily for and 10  90 days before 30  Go to line 7  List below 6  paid that crunot include	Made Before You Filed of States and States and States are you filed for bankruptcy that such creditor to whom you sach creditor to whom you	umer debts? consumer debts ehold purpose." y, did you pay a u paid a total of s ments for dome for this bankrupt	ny creditor a tota  66,425* or more stic support oblicy case.	al of \$6,425* or modified in one or more pay gations, such as ch	re? ments and the	ne total amount you nd alimony. Also, do
For (Ja	r last caler nuary 1 to	r Debtor 1's Neither Deindividual p During the No. Yes  * Subject	yments You  or Debtor 2  ebtor 1 nor Debtor 2  orimarily for a  90 days befor  Go to line 7  List below e  paid that cr  not include  to adjustmen  or Debtor 2 o	Made Before You Filed of States and States are you filed for bankruptcy to be before You filed for bankruptcy to be ach creditor to whom you be ditor. Do not include paying payments to an attorney for the states are to see the states are to see the states are to see the second seed to see the second seed to see the s	mer debts? consumer debts chold purpose." y, did you pay a paid a total of s ments for dome for this bankrup years after that for	Consumer deb  ny creditor a tota  66,425* or more stic support oblicy case. or cases filed or	al of \$6,425* or moding in one or more pay gations, such as character the date o	re? ments and the ild support a f adjustment.	ne total amount you nd alimony. Also, do
For (Ja	r last caler nuary 1 to	T December  T Debtor 1's  Neither Deindividual p  During the No. Yes  * Subject  Debtor 1 c  During the	yments You  or Debtor 2  ebtor 1 nor Debtor 2  orimarily for a  90 days befor  Go to line 7  List below e  paid that cr  not include  to adjustmen  or Debtor 2 o	Made Before You Filed a selector 2 has primarily consumers of the personal, family, or house one you filed for bankruptcy and creditor. Do not include paying payments to an attorney of ton 4/01/19 and every 3 year both have primarily content on you filed for bankruptcy one you filed for bankruptcy.	mer debts? consumer debts chold purpose." y, did you pay a paid a total of s ments for dome for this bankrup years after that for	Consumer deb  ny creditor a tota  66,425* or more stic support oblicy case. or cases filed or	al of \$6,425* or moding in one or more pay gations, such as character the date o	re? ments and the ild support a f adjustment.	ne total amount you nd alimony. Also, do
For (Ja	r last caler nuary 1 to	r Debtor 1's Neither Deindividual p During the No. Yes  * Subject Debtor 1 c During the	yments You  or Debtor 2  ebtor 1 nor E  orimarily for a  90 days befor  Go to line 7  List below e  paid that cr  not include to adjustment  or Debtor 2 o  90 days befor  Go to line 7  List below e  include pay	Made Before You Filed a selector 2 has primarily consumers of the personal, family, or house one you filed for bankruptcy and creditor. Do not include paying payments to an attorney of ton 4/01/19 and every 3 year both have primarily content on you filed for bankruptcy one you filed for bankruptcy.	umer debts? ensumer debts ehold purpose." y, did you pay a u paid a total of s ments for dome for this bankrupt years after that f ensumer debts. y, did you pay a u paid a total of s upaid a total of s upaid a total of s	Consumer deb ny creditor a tota \$6,425* or more stic support oblicy case. or cases filed or ny creditor a tota	in one or more pay gations, such as character the date on all of \$600 or more?	re?  ments and the support a fadjustment. The support a	ne total amount you nd alimony. Also, do
For (Ja	r last caler nuary 1 to	T December  T Debtor 1's  Neither Deindividual p  During the No. Yes  * Subject  Debtor 1 c  During the	yments You  or Debtor 2 ebtor 1 nor E primarily for a  90 days befor Go to line 7 List below e paid that cr not include to adjustment or Debtor 2 o 90 days befor Go to line 7 List below e include pay attorney for	Made Before You Filed a selector 2 has primarily consumer you filed for bankruptcy and creditor. Do not include paying payments to an attorney for you filed for bankruptcy and every 3 year both have primarily concept you filed for bankruptcy are you filed for bankruptcy and creditor to whom you ments for domestic supportant.	mer debts? chsumer debts ehold purpose." y, did you pay a paid a total of s ments for dome for this bankrup years after that f chsumer debts. y, did you pay a paid a total of s ort obligations, s	Consumer deb ny creditor a tota \$6,425* or more stic support oblicy case. or cases filed or ny creditor a tota	in one or more pay gations, such as character the date on all of \$600 or more?	re? ments and the ild support a f adjustment. you paid that Also, do not i	ne total amount you nd alimony. Also, do

	btor 1 Michael L. Hubbard Eva M. Janus		Cas	se number (if known)		
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and ar	u are a gener ny managing a	al partner; corporation: agent, including one fo
	□ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Melodie Janus 4105 Gertrude Dearborn Heights, MI 48125	January, 2018	\$300.00	\$0.00		nt of money to purchase s gifts.
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos  ■ No □ Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a c	lebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cre	ditor's name
	modifications, and contract disputes.  ■ No □ Yes. Fill in the details.  Case title	Nature of the case	Court or agency		Status of t	ne case
	Case number	Nature of the case	oourt or agency		Otatus Of the	ic case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		oreclosed, garnis	hed, attache	d, seized, or levied? Value of the property
	Ally Einanaial	Explain what happened	a	withi	in 12	Unknown
	Ally Financial Attn: Bankruptcy Dept	2010 Jeep Patriot		mon		Unknown
	Po Box 380901	■ Property was reposse	essed.			
	Bloomington, MN 55438	☐ Property was foreclosed. ☐ Property was garnished.				
		☐ Property was attache				
	Mich 1st Cu 27000 Evergreen Rd Lathrup Village, MI 48076	2010 Chevy Malibu  Property was reposse	essed.	withi mon		Unknown
		☐ Property was foreclos				
		☐ Property was garnish				
		☐ Property was attache	d, seized or levied.			

	otor 1 otor 2	Michael L. Hubbard Eva M. Janus		Case number	er (if known)			
11.	accou	n 90 days before you filed for bank unts or refuse to make a payment b No		did any creditor, including a bank or financial i you owed a debt?	nstitution, set off any a	amounts from your		
	_	Yes. Fill in the details.						
		litor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount		
12.	court	-appointed receiver, a custodian, o		as any of your property in the possession of ar er official?	n assignee for the bend	efit of creditors, a		
	_	No						
		Yes						
Par	t 5:	List Certain Gifts and Contribution	ıs					
13.	<b>I</b>	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, c	did you give any gifts with a total value of more	than \$600 per person	?		
			10	Describe the gifts	Dates you gave	Value		
	per p	s with a total value of more than \$60 person		Describe the gifts	Dates you gave the gifts	value		
	Pers Addr	on to Whom You Gave the Gift and ress:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No  ■ Yes. Fill in the details for each gift or contribution.							
	more Char	s or contributions to charities that the than \$600 rity's Name Tess (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value		
D	4.00	List Contain Lagge						
	Withi	List Certain Losses n 1 year before you filed for bankru mbling?	ıptcy or	since you filed for bankruptcy, did you lose an	ything because of the	t, fire, other disaster		
		No						
		Yes. Fill in the details.						
		cribe the property you lost and the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost		
Par	t 7:	List Certain Payments or Transfer	s	, ,				
16.	consu	ulted about seeking bankruptcy or	preparii	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services requir	,	rty to anyone you		
		No						
		Yes. Fill in the details.						
				Description and value of any preparty	Data navment	Amount of		
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not \	<b>′</b> ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	Con Mich 2300 Brov	sumer Protection Attorneys of		Attorney Fees	within 30 days offiling of case	\$1,165.00		

	otor 1 Michael L. Hubbard Eva M. Janus				Case numbe	「 (if known)		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transfei	Description and value of any property transferred			Date payment or transfer was made	Amount of payment	
	Summit Financial Education P.O. Box 1636 Cortaro, AZ 85652	Credit	Counsel	ing		within 30 days of filing	\$35.00	
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.							
	No							
	Yes. Fill in the details.  Person Who Was Paid  Address	Descrip transfer		value of any prop	erty	Date payment or transfer was	Amount of payment	
						made	. ,	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address		property transferred paymen		e any property or s received or debts xchange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No							
	☐ Yes. Fill in the details.							
	Name of trust	Descrip	Description and value of the property transferre			Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, In	struments, Sa	fe Deposi	it Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso	or other finance	cial accou	nts; certificates o	of deposit; s			
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits account nun		Type of accour instrument	c	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer	
	Michigan First Credit Union 7700 Puritan Street Detroit, MI 48238	XXXX-		☐ Checking ■ Savings ☐ Money Mark	fi	rithin 1 year of ling	Unknown	

☐ Other\_\_

Debtor 1 Michael L. Hubbard Debtor 2 Eva M. Janus

Case number (if known)

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?			
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inforn	nation					
For	the purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground	•				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that y	you know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Official Form 107

	ebtor 1 Michael L. Hubbard Ebtor 2 Eva M. Janus		Case number (if known)	
26.	Have you been a party in any judicial or ad	ministrative proceeding under any env	ironmental law? Include settlement	s and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	art 11: Give Details About Your Business or	Connections to Any Business		
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have ar	ny of the following connections to a	ny business?
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	, either full-time or part-time	-
	☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing ex	recutive of a corporation		
	☐ An owner of at least 5% of the votir	ng or equity securities of a corporation		
	■ No. None of the above applies. Go to	Part 12.		
	☐ Yes. Check all that apply above and fil	Il in the details below for each busines:	S.	
	Business Name	Describe the nature of the business	Do not include Social Security number or ITIN.	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		
			Dates business existed	
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement	to anyone about your business? In	clude all financial
	_			
	■ No □ Yes. Fill in the details below.			
	Name	Date Issued		
	Address (Number, Street, City, State and ZIP Code)			
Par	art 12: Sign Below			
are vith	ave read the answers on this <i>Statement of Fi</i> true and correct. I understand that making a h a bankruptcy case can result in fines up to U.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property,	or obtaining money or property by	
/s/	/ Michael L. Hubbard	/s/ Eva M. Janus		
Mi	ichael L. Hubbard	Eva M. Janus		
Sig	gnature of Debtor 1	Signature of Debtor 2		
Dat	December 3, 2018	Date December 3, 2018	8	
<b>I</b>	<b>I you attach additional pages to <i>Your Statem</i> No</b> Yes	ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form	107)?
Did ■ N	<b>I you pay or agree to pay someone who is no</b> No	ot an attorney to help you fill out bankru	uptcy forms?	
□ Y	Yes. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declarati	ion, and Signature (Official Form 119).	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

## **United States Bankruptcy Court Eastern District of Michigan**

	ael L. Hubbard M. Janus		Case No.
		Debtor(s)	Chapter 7
		CTATEMENT OF A TODAY TO DO	OTTOD (C)
		STATEMENT OF ATTORNEY FOR DEE PURSUANT TO F.R.BANKR.P. 2016	
The u	ndersigned, pursuant to F.R.B	ankr.P. 2016(b), states that:	
The u	ndersigned is the attorney for	the Debtor(s) in this case.	
The co	ompensation paid or agreed to	be paid by the Debtor(s) to the undersigned is:	[Check one]
[ <b>X</b> ]	FLAT FEE		
A.	9	ed in contemplation of and in connection with the paid	
B.	Prior to filing this statem	ent, received	<u>1,165.00</u>
C.	The unpaid balance due	and payable is	0.00_
[]	<b>RETAINER</b>		
A.	Amount of retainer recei	ved	
\$ <u> </u>	of the filing fee has bee	proved fees and expenses exceeding the amount in paid.	
	urn for the above-disclosed feet to not apply.]	, I have agreed to render legal service for all as	pects of the bankruptcy case, including: [Cross
A.	Analysis of the debtor's fi bankruptcy;	nancial situation, and rendering advice to the de	ebtor in determining whether to file a petition in
B.		ny petition, schedules, statement of affairs and	
C. <del>D.</del> —		or at the meeting of creditors and confirmation or in adversary proceedings and other contested	
E.	Reaffirmations;	or in deversary proceedings and other contested	d building induction,
<del>F.</del> —	Redemptions;		
<del>G.</del> —	Other:		
By ag	reement with the debtor(s), th	e above-disclosed fee does not include the follo	wing services:
The so	ource of payments to the unde	rsigned was from:	
A.		s) earnings, wages, compensation for services	performed
B.	Other (	describe, including the identity of payor)	
		greed to share, with any other person, other tha or to be paid except as follows:	n with members of the undersigned's law firm or
Dec	cember 3, 2018		/ Bryan Yaldou
		Br	ttorney for the Debtor(s) ryan Yaldou P70600 onsumer Protection Attorneys of Michiga

Agreed: /s/ Michael L. Hubbard Michael L. Hubbard Eva M. Janus Debtor Debtor

23000 Telegraph Rd, Suite 5 Brownstown, MI 48134

/s/ Eva M. Janus

734-692-9200 bryan.yaldou@gmail.com

### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

#### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Best Case Bankruptcy

# **United States Bankruptcy Court Eastern District of Michigan**

In re	Michael L. Hubbard Eva M. Janus		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify th	nat the attached list of creditors is true and co	orrect to the best	of their knowledge.
Date:	December 3, 2018	/s/ Michael L. Hubbard		
	·	Michael L. Hubbard		
		Signature of Debtor		
Date:	December 3, 2018	/s/ Eva M. Janus		
	·	Eva M. Janus		
		Signature of Debtor		

Alliance One Receivables ManabæmædtG. Patterson DO

1684 Woodlands Dr

Ste 150

Maumee, OH 43537

Atn: 13776C

PO Box 14000

Belfast, ME 04915

Henry Ford Wyandotte Hos
2333 Biddle
Wyandotte, MI 48192

Alltran Financial Dept of Ed / Navient LJ Ross Associates PO Box 610 Attn: Claims Dept 6360 W Jackson Rd Ann Arbor, MI 48103 Wilkes Barr, PA 18773

Ally Financial Diversified Consultants, Inc.LJ Ross Associates Attn: Bankruptcy Dept Attn: Bankruptcy PO Box 380901 Po Box 551268 Jackson, MI 49204 Bloomington, MN 55438 Jacksonville, FL 32255

Bank Of America DTE Energy Mich 1st Cu
Attn: Bankruptcy 1 Energy Plz 27000 Evergreen Rd
Po Box 982238 #WCB2106 Lathrup Village, MI 4807
El Paso, TX 79998 Detroit, MI 48226

Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130
DTE Energy
One Energy Plaza/ Attn Bankrupt&2/68 Oakwood Ave.
2160 WCB
Flat Rock, MI 48134
Detroit, MI 48226

CBCS EPMG Downriver PLLC Phoenix Financial ServicL PO Box 163250 PO Box 96115 Po Box 361450 Columbus, OH 43216 Oklahoma City, OK 73143-6115 Indianapolis, IN 46236

CBCS EPMG of Michigan, PC Portfolio Recovery Assoc PO Box 163333 PO Box 96115 120 Corporate Blvd Ste 10 Columbus, OH 43216 Oklahoma City, OK 73143-6115 Norfolk, VA 23502

CBCS Firstsource advantage llc Portfolio Recovery Assoc PO Box 2589 1232 W ST RD 2 PO Box 12914 Norfolk, VA 23541

Citibank/The Home Depot Henry Ford Health System
Attn: Recovery/Centralized Bancringt July 44
Po Box 790034 Troy, MI 48007
St Louis, MO 63179

Sun Home Services
The American Center
27777 Franklin Rd, Suite 2
Southfield, MI 48034

Country Meadows
3211 Will Carleton Rd.
Flat Rock, MI 48134

Henry Ford Wyandotte HospitalThe River Urgent Care
PO Box 1799
18930 West Rd.
Colorado Springs, CO 80901 Woodhaven, MI 48183

Triad Fin Sv 4336 Pablo Oaks Ct Jacksonville, FL 32224